



Sample Receipt Checklist

STEWART ENVIRONMENTAL CONSULTANTS, LLC.
2600 Canton Ct, Unit C, Fort Collins, CO 80525

Client: Stratus

Initials: JDM

Date: 7/6/17 Time: 18:20

MST/MDT

To be filled out by laboratory courier, if applicable:

- 1 Were samples retrieved by a laboratory courier?
- 2 Were samples on ice or in a refrigerated state upon retrieval?
- Courier Initials: JX Date: 7-6-17 Time: 18:20

Yes	No	NA
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

To be filled out by laboratory sample receiving:

- 3 Shipping container/cooler intact?
- 4 Chain of Custody (COC) present?
- 5 Sample bottles intact? *
- 6 Samples on blue-ice?
- 7 Samples on wet ice?
- 8 Samples received within 4 hours of sampling?
- 9 Record temperature of sample bottles within cooler with infra-red thermometer.

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Container #				
Temp °C	<u>17.6</u>			

- 10 Sample thawed and free of any ice? *
- 11 COC complete, legible, signed and dated?
- 12 Labels on bottles complete and legible? *
- 13 COC in agreement with sample bottle labels? *
- 14 Proper container used for analyses requested? *
- 15 Samples requiring preservation preserved correctly? *
- 16 Sufficient sample volume for analyses requested? *
- 17 Samples within holding times for analyses requested? *
- 18 Samples requiring no headspace are free of headspace? *

Yes	No	NA
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

(VOC, TVPH, BTEX, Ethanol, Radon) If no, size of bubble: _____ < green pea, _____ > green pea

* If no, document on Chain of Custody.

Notes:



Batch: 2456642

Facsimile: (970) 226-4946

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STEWART ENVIRONMENTAL CONSULTANTS, INC.
2600 Canton Ct, Unit C, Fort Collins, CO 80525

Batch: 2456682

Telephone: (970) 226-5500

Facsimile: (970) 226-4946

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Batch:

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Batch: 2456797

Facsimile: (970) 226-4946

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Batch:

Facsimile: (970) 226-4946

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CHAIN OF CUSTODY RECORD

STEWART ENVIRONMENTAL CONSULTANTS, INC.
3801 Automation Way, Suite 200, Fort Collins, CO 80525

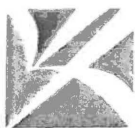
Batch:

Telephone: (970) 226-5500

Facsimile: ()

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EC USE ONLY								SAMPLER	
Client No.	CLIENT: Stratus Companies - ACZ						Name: <i>James Stewart</i>		
Sample No.	SAMPLE COLLECTION INFO			CLIENT SAMPLE IDENTIFICATION	Matrix Type	QC Report Needed	Total No. of Cont.	Signature: <i>[Signature]</i>	
S10-	Date	Time	Grab / Comp						ANALYSES REQUESTED
PR1732	7-17-17	15:00	G	MW-ZR	NW		3	Phenols	
								Total Organic Carbon	
								Method 8270 (all normal compounds, including those below)	
								Benzyl Butyl Phthalate	
								Bis(2-ethylhexyl) phthalate	
								Di-n-butyl Phthalate	
								Diethyl Phthalate	
								Dimethyl Phthalate	
								Di-n-octyl Phthalate	
								1,4-Dioxane	
								Benzoic Acid	
								Bencyl alcohol	
								2-Methylphenol	
Compliance samples may require you to report the temperature of samples as they arrive in the laboratory. Would you like the temperature of samples recorded upon receipt by the laboratory? Leaving this field blank implies that the incoming temperature is not requested.									
RELINQUISHED BY <i>[Signature]</i>		DATE / TIME <i>7-19-17 14:30</i>	Received by <i>CTF 7/19/17</i>	Date / Time <i>1430</i>	REQUESTED COMPLETION DATE		REPORT TO: PHONE: FAX: CLIENT: ADDRESS: CITY, STATE ZIP: INVOICE TO: ADDRESS: CITY, STATE ZIP:		
Relinquished by		Date / Time	Received by	Date / Time	MATRIX TYPE WW = waste water DW = drinking water L = Liquid S = soil A = Air SL = sludge SD = Solid				
Relinquished by		Date / Time	Received by	Date / Time	CDPHE REPORT REQUIRED				
Database Entry By		Date			PWSID #				
					Sample Kit Sent? Yes / No				



Sample Receipt Checklist

STEWART ENVIRONMENTAL CONSULTANTS, LLC.
2600 Canton Ct, Unit C, Fort Collins, CO 80525

Client: Stratus

Initials: JDM

Date: 7/18/17 Time: 11:00

MST/MDT

To be filled out by laboratory courier, if applicable:

- | | Yes | No | NA |
|--|-----|----|----|
| 1 Were samples retrieved by a laboratory courier? | / | | |
| 2 Were samples on ice or in a refrigerated state upon retrieval? | / | | |

Courier Initials: JA Date: 7-17-17 Time: 19:00

To be filled out by laboratory sample receiving:

- | | Yes | No | NA |
|--|-----|----|----|
| 3 Shipping container/cooler intact? | | | |
| 4 Chain of Custody (COC) present? | | | |
| 5 Sample bottles intact? * | | | |
| 6 Samples on blue-ice? | | / | |
| 7 Samples on wet ice? | / | | |
| 8 Samples received within 4 hours of sampling? | | | |

- 9 Record temperature of sample bottles within cooler with infra-red thermometer.

Container #				
Temp °C	4.2	9.4		

- | | Yes | No | NA |
|---|-----|----|----|
| 10 Sample thawed and free of any ice? * | | | |
| 11 COC complete, legible, signed and dated? | | | |
| 12 Labels on bottles complete and legible? * | | | |
| 13 COC in agreement with sample bottle labels? * | | | |
| 14 Proper container used for analyses requested? * | | | |
| 15 Samples requiring preservation preserved correctly? * | | | |
| 16 Sufficient sample volume for analyses requested? * | | | |
| 17 Samples within holding times for analyses requested? * | | | |
| 18 Samples requiring no headspace are free of headspace? *
(VOC, TVPH, BTEX, Ethanol, Radon) If no, size of bubble: _____ < green pea, _____ > green pea | | | |

* If no, document on Chain of Custody.

Notes: Samples placed in fridge upon being
dropped off

CHAIN OF CUSTODY RECORD

STEWART ENVIRONMENTAL CONSULTANTS, INC.
3801 Automation Way, Suite 200, Fort Collins, CO 80525

Batch: 2456797

Telephone: (970) 226-5500

Facsimile: (970) 226-4946

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Batch: 24 S6642

Facsimile: (970) 226-4946

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STEWART ENVIRONMENTAL CONSULTANTS, INC.
3801 Automation Way, Suite 200, Fort Collins, CO 80525

Batch:

Telephone: (970) 226-5500

Facsimile: (970) 226-4946

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CHAIN OF CUSTODY RECORD

STEWART ENVIRONMENTAL CONSULTANTS, INC.
3801 Automation Way, Suite 200, Fort Collins, CO 80525

Batch:

Telephone: (970) 226-5500

Facsimile: (

PAGE ____ OF ____

EC USE ONLY		CLIENT: Stratus Companies - ACZ						Name: JAMES STEWART SAMPLER	
Client No.								Signature: <i>[Signature]</i>	
Sample No.	SAMPLE COLLECTION INFO			CLIENT SAMPLE IDENTIFICATION	Matrix Type	QC Report Needed	Total No. of Cont.	ANALYSES REQUESTED	
S10-	Date	Time	Grab / Comp						
7.17.17	7.17.17	14:00		MW-3	NW		1	Phenols Total Organic Carbon Method 8270 (all normal compounds, including those below) Benzyl Butyl Phthalate Bis(2-ethylhexyl) phthalate Di-n-butyl Phthalate Diethyl Phthalate Dimethyl Phthalate Di-n-octyl Phthalate 1,4-Dioxane Benzoic Acid Benzyl alcohol 2-Methylphenol	
Compliance samples may require you to report the temperature of samples as they arrive in the laboratory. Would you like the temperature of samples recorded upon receipt by the laboratory? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Leaving this field blank implies that the incoming temperature is not requested.									
RELINQUISHED BY	DATE / TIME	Received by	Date / Time	REQUESTED COMPLETION DATE				REPORT TO:	PHONE:
<i>[Signature]</i>	7/19/17 14:30	7/19/17	14:30						
Relinquished by	Date / Time	Received by	Date / Time	MATRIX TYPE				CLIENT:	FAX:
				WW = waste water DW = drinking water L = Liquid S = soil A = Air SL = sludge SD = Solid CDPHE REPORT REQUIRED				ADDRESS:	
Relinquished by	Date / Time	Received by	Date / Time	PWSID #				CITY, STATE ZIP:	
				Sample Kit Sent? <u>Yes</u> / <u>No</u>				INVOICE TO:	
Database Entry By	Date					ADDRESS:			
						CITY, STATE ZIP:			



Batch: 245690X

Facsimile: (970) 226-4946

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CHAIN OF CUSTODY RECORD

STEWART ENVIRONMENTAL CONSULTANTS, INC.
3801 Automation Way, Suite 200, Fort Collins, CO 80525

Batch: _____

Telephone: (970) 226-5500

Facsimile: (_____)

PAGE ____ OF ____

EC USE ONLY		CLIENT: Stratus Companies - ACZ						Name: JAMES STEWART	
Client No.	Sample No.	SAMPLE COLLECTION INFO			CLIENT SAMPLE IDENTIFICATION	Matrix Type	QC Report Needed	Total No. of Cont.	Signature: [Signature]
		Date	Time	Grab / Comp					ANALYSES REQUESTED
	S10-	7-27-17	12:00	G	MW-4	WW	1	3	Phenols
									Total Organic Carbon
									Method 8270 (all normal compounds, including those below)
									Benzyl Butyl Phthalate
									Bis(2-ethylhexyl) phthalate
									Di-n-butyl Phthalate
									Diethyl Phthalate
									Dimethyl Phthalate
									Di-n-octyl Phthalate
									1,4-Dioxane
									Benzoic Acid
									Bencyl alcohol
									2-Methylphenol

Compliance samples may require you to report the temperature of samples as they arrive in the laboratory. Would you like the temperature of samples recorded upon receipt by the laboratory? ☐ Yes ☒ No
Leaving this field blank implies that the incoming temperature is not requested.

RELINQUISHED BY	DATE / TIME	Received by	Date / Time	REQUESTED COMPLETION DATE	REPORT TO:	PHONE:
[Signature]	7-27-17 14:10	CTF	7/27/17 1410			
Relinquished by	Date / Time	Received by	Date / Time	MATRIX TYPE	CLIENT:	FAX:
				WW = waste water DW = drinking water L = Liquid	ADDRESS:	
Relinquished by	Date / Time	Received by	Date / Time	S = soil SL = sludge A = Air SD = Solid	CITY, STATE ZIP:	
				CDPHE REPORT REQUIRED	INVOICE TO:	
Database Entry By	Date			PWSID #	ADDRESS:	
				Sample Kit Sent? Yes / No	CITY, STATE ZIP:	



Sample Receipt Checklist

STEWART ENVIRONMENTAL CONSULTANTS, LLC.
2600 Canton Ct, Unit C, Fort Collins, CO 80525

Client: Stratus Initials: JDM Date: 7/27/17 Time: 16:20 MST/MDT

To be filled out by laboratory courier, if applicable:

- | | Yes | No | NA |
|--|-------------------------------------|--------------------------|--------------------------|
| 1 Were samples retrieved by a laboratory courier? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2 Were samples on ice or in a refrigerated state upon retrieval? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Courier Initials: JA Date: 7.27.17 Time: 16:20

To be filled out by laboratory sample receiving:

- | | Yes | No | NA |
|--|-------------------------------------|-------------------------------------|--------------------------|
| 3 Shipping container/cooler intact? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4 Chain of Custody (COC) present? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5 Sample bottles intact? * | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6 Samples on blue-ice? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 7 Samples on wet ice? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8 Samples received within 4 hours of sampling? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

- 9 Record temperature of sample bottles within cooler with infra-red thermometer.

Container #				
Temp °C	5.10			

- | | Yes | No | NA |
|--|--------------------------|--------------------------|--------------------------|
| 10 Sample thawed and free of any ice? * | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11 COC complete, legible, signed and dated? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12 Labels on bottles complete and legible? * | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13 COC in agreement with sample bottle labels? * | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14 Proper container used for analyses requested? * | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15 Samples requiring preservation preserved correctly? * | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16 Sufficient sample volume for analyses requested? * | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 17 Samples within holding times for analyses requested? * | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 18 Samples requiring no headspace are free of headspace? * | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

(VOC, TVPH, BTEX, Ethanol, Radon) If no, size of bubble: _____ < green pea, _____ > green pea

* If no, document on Chain of Custody.

Notes:

Put into fridge upon arrival



Batch: 2456682

Facsimile: (970) 226-4946

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Batch: 2456797

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[illegible]



STEWART ENVIRONMENTAL CONSULTANTS, INC.
2600 Canton Ct, Unit C, Fort Collins, CO 80525

Batch: 2456642

Telephone: (970) 226-5500

Facsimile: (970) 226-4946

PAGE ____ OF ____

SEC USE ONLY		CLIENT: Stratus Companies - Stewart Labs					Name: <u>James Stewart</u>		
Client No. <u>4484</u>		SAMPLE COLLECTION INFO			CLIENT SAMPLE IDENTIFICATION	Matrix Type	QC Report Needed	Total No. of Cont.	Signature: <u>[Signature]</u> ANALYSES REQUESTED
Sample No. <u>S10-193</u>		Date	Time	Grab / Comp					
<u>115B</u>		<u>7-10-17</u>	<u>13:15</u>	<u>G</u>	<u>MW-6</u>	<u>WW</u>	<u>1</u>	<u>5</u>	Method 8260 (see back of COC) - SL
									Metals - (see back of COC) SL
									Inorganic Analysis (see back of COC) - SL
Compliance samples may require you to report the temperature of samples as they arrive in the laboratory. Would you like the temperature of samples recorded upon receipt by the laboratory? Please check. <input type="checkbox"/> Yes, record and report temperature. <input type="checkbox"/> No, temperature not requested.									
Leaving this field blank implies that the incoming temperature is not requested.									
RELINQUISHED BY <u>[Signature]</u>		DATE / TIME <u>7-10-17</u> <u>19:00</u>	Received by <u>[Signature]</u>		DATE / TIME <u>7/11/17</u> <u>10:00</u>	REQUESTED COMPLETION DATE		REPORT TO:	PHONE:
Relinquished by		Date / Time	Received by		Date / Time	MATRIX TYPE WW = waste water DW = drinking water L = Liquid S = soil A = Air SL = sludge SD = Solid		CLIENT:	FAX:
Relinquished by		Date / Time	Received by		Date / Time	COPHE REPORT REQUIRED		ADDRESS:	
Database Entry By <u>[Signature]</u>		Date <u>7/12/17</u>				PWSID #		INVOICE TO:	
						Sample Kit Sent? <u>Yes / No</u>		ADDRESS:	
								CITY, STATE ZIP:	



Batch:

Facsimile: (970) 226-4946

PAGE ____ OF ____

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Batch: 2456797

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SEC USE ONLY Client No.		CLIENT: Stratus Companies - Stewart Labs					Name: JAMES STEWART Signature: <i>[Signature]</i> ANALYSES REQUESTED	
Sample No. S10-202	SAMPLE COLLECTION INFO			CLIENT SAMPLE IDENTIFICATION	Matrix Type	QC Report Needed	Total No. of Cont.	Method 8260 (see back of COC) - SL Metals - (see back of COC) SL Inorganic Analysis (see back of COC) - SL Sulfide 1 <i>[initials]</i> 1 <i>Cn</i>
	Date	Time	Grab / Comp					
	7-19-17	12:40	G					
Compliance samples may require you to report the temperature of samples as they arrive in the laboratory. Would you like the temperature of samples recorded upon receipt by the laboratory? Please check. <input type="checkbox"/> Yes, record and report temperature. <input type="checkbox"/> No, temperature not requested. Leaving this field blank implies that the incoming temperature is not requested.								
RELINQUISHED BY: <i>[Signature]</i>		DATE / TIME 7-20-17 19:00	Received by <i>[Signature]</i>	Date / Time 7/21/17 11:30	REQUESTED COMPLETION DATE		REPORT TO:	PHONE:
Relinquished by		Date / Time	Received by	Date / Time	MATRIX TYPE WW = waste water DW = drinking water L = Liquid S = soil A = Air SL = sludge SD = Solid CDPHE REPORT REQUIRED		CLIENT:	FAX:
Relinquished by		Date / Time	Received by	Date / Time	PWSID #		ADDRESS:	
Database Entry By <i>JDM</i>		Date 7/21/17			Sample Kit Sent? <u>Yes / No</u>		CITY, STATE ZIP:	



CHAIN OF CUSTODY RECORD

STEWART ENVIRONMENTAL CONSULTANTS, INC.
3801 Automation Way, Suite 200, Fort Collins, CO 80525

Batch:

Telephone: (970) 226-5500

Facsimile: (

PAGE ____ OF ____

EC USE ONLY								SAMPLER	
Client No.	CLIENT: Stratus Companies - ACZ							Name: <i>JR Stegert</i>	
Sample No.	SAMPLE COLLECTION INFO			CLIENT SAMPLE IDENTIFICATION	Matrix Type	QC Report Needed	Total No. of Cont.	Signature: <i>[Signature]</i> ANALYSES REQUESTED	
S17-	Date	Time	Grab / Comp						
	7/19/17	12:40		MW -6	W	Y	1	Phenols	
								Total Organic Carbon <i>TOC Only</i>	
								Method 8270 (all normal compounds, including those below)	
								Benzyl Butyl Phthalate	
								Bis(2-ethylhexyl) phthalate	
								Di-n-butyl Phthalate	
								Diethyl Phthalate	
								Dimethyl Phthalate	
								Di-n-octyl Phthalate	
								1,4-Dioxane	
								Benzoic Acid	
								Bencyl alcohol	
								2-Methylphenol	
<p>Compliance samples may require you to report the temperature of samples as they arrive in the laboratory. Would you like the temperature of samples recorded upon receipt by the</p> <p>Leaving this field blank implies that the incoming temperature is not requested.</p>									
RELINQUISHED BY		DATE / TIME	Received by		Date / Time	REQUESTED COMPLETION DATE		REPORT TO:	
<i>[Signature]</i>		7-19-17 14:30	CTE 7/19/17		1430			PHONE: 970 226 5500	
								FAX:	
Relinquished by		Date / Time	Received by		Date / Time	MATRIX TYPE		CLIENT:	
						WW = waste water DW = drinking water L = Liquid S = soil A = Air SL = sludge SD = Solid		Stegert Lukas	
Relinquished by		Date / Time	Received by		Date / Time			ADDRESS:	
								CITY, STATE ZIP:	
Relinquished by		Date / Time	Received by		Date / Time	CDRHE REPORT REQUIRED		INVOICE TO:	
								ADDRESS:	
Database Entry By		Date		PWSID #		Sample Kit Sent? Yes / No		CITY, STATE ZIP:	



Batch: 2456677

Facsimile: (970) 226-4946

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Batch:

Facsimile: (

PAGE OF

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CHAIN OF CUSTODY RECORD

STEWART ENVIRONMENTAL CONSULTANTS, INC.
3801 Automation Way, Suite 200, Fort Collins, CO 80525

Batch:

Telephone: (970) 226-5500

Facsimile: ()

PAGE ____ OF ____

EC USE ONLY								SAMPLER	
Client No.	CLIENT: Stratus Companies - ACZ						Name: <i>JR Stewart</i>		
Sample No.	SAMPLE COLLECTION INFO			CLIENT SAMPLE IDENTIFICATION	Matrix Type	QC Report Needed	Total No. of Cont.	Signature: <i>[Signature]</i>	
S17-	Date	Time	Grab / Comp						ANALYSES REQUESTED
104121	7/19/17	13:20	G	MW-11	W	Y	1	Phenols	
								Total Organic Carbon	
								Method 8270 (all normal compounds, including those below)	
								Benzyl Butyl Phthalate	
								Bis(2-ethylhexyl) phthalate	
								Di-n-butyl Phthalate	
								Diethyl Phthalate	
								Dimethyl Phthalate	
								Di-n-octyl Phthalate	
								1,4-Dioxane	
								Benzoic Acid	
								Benzyl alcohol	
								2-Methylphenol	
<p>Compliance samples may require you to report the temperature of samples as they arrive in the laboratory. Would you like the temperature of samples recorded upon receipt by the laboratory? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Leaving this field blank implies that the incoming temperature is not requested.</p>									
RELINQUISHED BY		DATE / TIME	Received by	DATE / TIME	REQUESTED COMPLETION DATE		REPORT TO:		
<i>[Signature]</i>		7-19-17 14:30	CTF 7/19/17	1430			PHONE: FAX: CLIENT: ADDRESS: CITY, STATE ZIP: INVOICE TO: ADDRESS: CITY, STATE ZIP:		
Relinquished by		Date / Time	Received by	Date / Time	MATRIX TYPE				
					WW = waste water DW = drinking water L = Liquid S = soil A = Air SL = sludge SD = Solid				
Relinquished by		Date / Time	Received by	Date / Time	CDPHE REPORT REQUIRED				
Database Entry By			Date		PWSID #				
					Sample Kit Sent? Yes / No				



Batch:

Facsimile: (970) 226-4946

PAGE OF

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Batch:

Facsimile: (

PAGE ____ OF ____

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Sample Receipt Checklist

STEWART ENVIRONMENTAL CONSULTANTS, LLC.
2600 Canton Ct, Unit C, Fort Collins, CO 80525

Client: Stratus Initials: JDM Date: 7/12/17 Time: 10:00 MST/MDT

To be filled out by laboratory courier, if applicable:

	Yes	No	NA
1 Were samples retrieved by a laboratory courier?	/		
2 Were samples on ice or in a refrigerated state upon retrieval?	/		

Courier Initials: JX Date: 7-11-17 Time: 20:20

To be filled out by laboratory sample receiving:

	Yes	No	NA
3 Shipping container/cooler intact?			/
4 Chain of Custody (COC) present?	/		
5 Sample bottles intact? *	/		
6 Samples on blue-ice?		/	
7 Samples on wet ice?	/		
8 Samples received within 4 hours of sampling?		/	

9 Record temperature of sample bottles within cooler with infra-red thermometer.

Container #				
Temp °C	7.0°			

	Yes	No	NA
10 Sample thawed and free of any ice? *	/		
11 COC complete, legible, signed and dated?	/		
12 Labels on bottles complete and legible? *	/		
13 COC in agreement with sample bottle labels? *	/		
14 Proper container used for analyses requested? *	/		
15 Samples requiring preservation preserved correctly? *	/		
16 Sufficient sample volume for analyses requested? *	/		
17 Samples within holding times for analyses requested? *	/		
18 Samples requiring no headspace are free of headspace? *			/

(VOC, TVPH, BTEX, Ethanol, Radon) If no, size of bubble: _____ < green pea, _____ > green pea

* If no, document on Chain of Custody.

Notes:



Batch: 2456797

Facsimile: (970) 226-4946

PAGE OF

[illegible]



CHAIN OF CUSTODY RECORD

STEWART ENVIRONMENTAL CONSULTANTS, INC.
3801 Automation Way, Suite 200, Fort Collins, CO 80525

Batch:

Telephone: (970) 226-5500

Facsimile: (

PAGE ____ OF ____

EC USE ONLY								SAMPLER	
Client No.	CLIENT: Stratus Companies - ACZ							Name:	
Sample No.	SAMPLE COLLECTION INFO			CLIENT SAMPLE IDENTIFICATION	Matrix Type	QC Report Needed	Total No. of Cont.	Signature:	ANALYSES REQUESTED
	Date	Time	Grab / Comp						
S10-									
2021120	7/19/17	13:00	G	M12-1Z	L	Y	1		Phenols
									Total Organic Carbon
									Method 8270 (all normal compounds, including those below)
									Benzyl Butyl Phthalate
									Bis(2-ethylhexyl) phthalate
									Di-n-butyl Phthalate
									Diethyl Phthalate
									Dimethyl Phthalate
									Di-n-octyl Phthalate
									1,4-Dioxane
									Benzoic Acid
									Bencyl alcohol
									2-Methylphenol
Compliance samples may require you to report the temperature of samples as they arrive in the laboratory. Would you like the temperature of samples recorded upon receipt by the									
Leaving this field blank implies that the incoming temperature is not requested.									
RELINQUISHED BY	DATE / TIME	Received by	Date / Time	REQUESTED COMPLETION DATE			REPORT TO:	PHONE:	
JCF	7/19/17 14:30	CTF	7/19/17 1430					FAX:	
Relinquished by	Date / Time	Received by	Date / Time	MATRIX TYPE			CLIENT:		
				WW = waste water DW = drinking water L = Liquid			ADDRESS:		
				S = soil A = Air SL = sludge SD = Solid			CITY, STATE ZIP:		
				CDPH REPORT REQUIRED			INVOICE TO:		
Database Entry By	Date	PWSID #			ADDRESS:				
		Sample Kit Sent? Yes / No			CITY, STATE ZIP:				



Batch: 2456682

Facsimile: (970) 226-4946

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Batch:

Facsimile: (

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Sample Receipt Checklist

STEWART ENVIRONMENTAL CONSULTANTS, LLC.
2600 Canton Ct, Unit C, Fort Collins, CO 80525

Client: Stratus Initials: JDM Date: 7/21/17 Time: 11:30 MST/MDT

To be filled out by laboratory courier, if applicable:

- | | Yes | No | NA |
|--|-----|----|----|
| 1 Were samples retrieved by a laboratory courier? | / | | |
| 2 Were samples on ice or in a refrigerated state upon retrieval? | / | | |

Courier Initials: JN Date: 7-20-19 Time: 19:08

To be filled out by laboratory sample receiving:

- | | Yes | No | NA |
|--|-----|----|----|
| 3 Shipping container/cooler intact? | | | ✓ |
| 4 Chain of Custody (COC) present? | ✓ | | |
| 5 Sample bottles intact? * | ✓ | | |
| 6 Samples on blue-ice? | | / | |
| 7 Samples on wet ice? | / | | |
| 8 Samples received within 4 hours of sampling? | | / | |

- 9 Record temperature of sample bottles within cooler with infra-red thermometer.

Container #				
Temp °C	4.30			

- | | Yes | No | NA |
|---|-----|----|----|
| 10 Sample thawed and free of any ice? * | ✓ | | |
| 11 COC complete, legible, signed and dated? | ✓ | | |
| 12 Labels on bottles complete and legible? * | ✓ | | |
| 13 COC in agreement with sample bottle labels? * | ✓ | | |
| 14 Proper container used for analyses requested? * | ✓ | | |
| 15 Samples requiring preservation preserved correctly? * | ✓ | | |
| 16 Sufficient sample volume for analyses requested? * | ✓ | | |
| 17 Samples within holding times for analyses requested? * | ✓ | | |
| 18 Samples requiring no headspace are free of headspace? *
(VOC, TVPH, BTEX, Ethanol, Radon) If no, size of bubble: _____ < green pea, _____ > green pea | ✓ | | |

* If no, document on Chain of Custody.

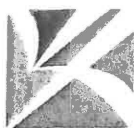
Notes: Put into fridge upon arrival



Batch: 2456863

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Sample Receipt Checklist

STEWART ENVIRONMENTAL CONSULTANTS, LLC.
2600 Canton Ct, Unit C, Fort Collins, CO 80525

Client: Btratus

Initials: JDM

Date: 7/25/17 Time: 18:30

MST/MDT

To be filled out by laboratory courier, if applicable:

- | | Yes | No | NA |
|--|-----|----|----|
| 1 Were samples retrieved by a laboratory courier? | / | | |
| 2 Were samples on ice or in a refrigerated state upon retrieval? | / | | |

Courier Initials: JA Date: 7.25.17 Time: 18:30

To be filled out by laboratory sample receiving:

- | | Yes | No | NA |
|--|-----|----|----|
| 3 Shipping container/cooler intact? | | | ✓ |
| 4 Chain of Custody (COC) present? | ✓ | | |
| 5 Sample bottles intact? * | ✓ | | |
| 6 Samples on blue-ice? | | / | |
| 7 Samples on wet ice? | / | | |
| 8 Samples received within 4 hours of sampling? | / | | |

- 9 Record temperature of sample bottles within cooler with infra-red thermometer.

Container #				
Temp °C	4.80			

- | | Yes | No | NA |
|--|-----|----|----|
| 10 Sample thawed and free of any ice? * | ✓ | | |
| 11 COC complete, legible, signed and dated? | ✓ | | |
| 12 Labels on bottles complete and legible? * | ✓ | | |
| 13 COC in agreement with sample bottle labels? * | ✓ | | |
| 14 Proper container used for analyses requested? * | ✓ | | |
| 15 Samples requiring preservation preserved correctly? * | ✓ | | |
| 16 Sufficient sample volume for analyses requested? * | ✓ | | |
| 17 Samples within holding times for analyses requested? * | ✓ | | |
| 18 Samples requiring no headspace are free of headspace? * | | | ✓ |
- (VOC, TVPH, BTEX, Ethanol, Radon) If no, size of bubble: _____ < green pea, _____ > green pea

* If no, document on Chain of Custody.

Notes: put into fridge upon arrival



Batch: 2456642

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Sample Receipt Checklist

STEWART ENVIRONMENTAL CONSULTANTS, LLC.
2600 Canton Ct, Unit C, Fort Collins, CO 80525

Client: stratus Initials: DDM Date: 7/11/17 Time: 10:00 MST/MDT

To be filled out by laboratory courier, if applicable:

- | | Yes | No | NA |
|--|-----|----|----|
| 1 Were samples retrieved by a laboratory courier? | / | | |
| 2 Were samples on ice or in a refrigerated state upon retrieval? | / | | |

Courier Initials: FA Date: 7-10-17 Time: 19:00

To be filled out by laboratory sample receiving:

- | | Yes | No | NA |
|--|-----|----|----|
| 3 Shipping container/cooler intact? | | | / |
| 4 Chain of Custody (COC) present? | / | | |
| 5 Sample bottles intact? * | / | | |
| 6 Samples on blue-ice? | | / | |
| 7 Samples on wet ice? | / | | |
| 8 Samples received within 4 hours of sampling? | | | |

- 9 Record temperature of sample bottles within cooler with infra-red thermometer.

Container #				
Temp °C	12.2°			

- | | Yes | No | NA |
|--|-----|----|----|
| 10 Sample thawed and free of any ice? * | / | | |
| 11 COC complete, legible, signed and dated? | / | | |
| 12 Labels on bottles complete and legible? * | / | | |
| 13 COC in agreement with sample bottle labels? * | / | | |
| 14 Proper container used for analyses requested? * | / | | |
| 15 Samples requiring preservation preserved correctly? * | / | | |
| 16 Sufficient sample volume for analyses requested? * | / | | |
| 17 Samples within holding times for analyses requested? * | / | | |
| 18 Samples requiring no headspace are free of headspace? * | | ✓ | / |

(VOC, TVPH, BTEX, Ethanol, Radon) If no, size of bubble: _____ < green pea, _____ > green pea

* If no, document on Chain of Custody.

Notes: MW 15 needs to be resampled - too much headspace.



Batch:

Telephone: (970) 226-5500

Facsimile: (

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EC USE ONLY						
Client No.		CLIENT:				
Sample No.		SAMPLE COLLECTION INFO			CLIENT SAMPLE IDENTIFICATION	
Date	Time	Grab / Comp	Matrix Type	QC Report Needed	Total No. of Cont.	
09-14-23	7-12-17	12:40	G	MW-B	WW	3
						Method 8270 (see back of COC) - ACZ
						Total Organic Carbon - ACZ
Compliance samples may require you to report the temperature of samples as they arrive in the laboratory. Would you like the temperature of samples recorded upon receipt by the laboratory? Leaving this field blank implies that the incoming temperature is not requested.						
RELINQUISHED BY		DATE / TIME	Received by	Date / Time	REQUESTED COMPLETION DATE	
[Signature]		7-12-17 16:30	[Signature]	7-12-17 16:30		
Relinquished by		Date / Time	Received by	Date / Time	MATRIX TYPE	
					WW = waste water DW = drinking water L = Liquid	
Relinquished by		Date / Time	Received by	Date / Time	S = soil SL = sludge A = Air SD = Solid	
					PWSID #	
Database Entry By		Date	Sample Kit Sent? Yes / No			
Name:					SAMPLER	
Signature:					ANALYSES REQUESTED	
Method 8270 (see back of COC) - ACZ						
Total Organic Carbon - ACZ						
REPORT TO:					PHONE:	
					FAX:	
CLIENT:						
ADDRESS:						
CITY, STATE ZIP:						
INVOICE TO:						
ADDRESS:						
CITY, STATE ZIP:						



Batch: 2456753

Facsimile: (970) 226-4946

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CHAIN OF CUSTODY RECORD

STEWART ENVIRONMENTAL CONSULTANTS, INC.
3801 Automation Way, Suite 200, Fort Collins, CO 80525

Batch: _____

Telephone: (970) 226-5500

Facsimile: (_____)

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EG USE ONLY								Name: <u>James Stewart</u>	
Client No.	CLIENT: Stratus Companies - ACZ							Signature: <u>[Signature]</u>	
Sample No.	SAMPLE COLLECTION INFO			CLIENT SAMPLE IDENTIFICATION	Matrix Type	QC Report Needed	Total No. of Cont.	ANALYSES REQUESTED	
S10-	Date	Time	Grab / Comp						
1991737	7-17-17	13:00		MW-15	WW		1	Phenols Total Organic Carbon Method 8270 (all normal compounds, including those below) Benzyl Butyl Phthalate Bis(2-ethylhexyl) phthalate Di-n-butyl Phthalate Diethyl Phthalate Dimethyl Phthalate Di-n-octyl Phthalate 1,4-Dioxane Benzoic Acid Bencyl alcohol 2-Methylphenol	
<p>Compliance samples may require you to report the temperature of samples as they arrive in the laboratory. Would you like the temperature of samples recorded upon receipt by the laboratory? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Leaving this field blank implies that the incoming temperature is not requested.</p>									
RELINQUISHED BY: <u>[Signature]</u>		DATE / TIME: <u>7-19-17 14:30</u>	Received by: <u>CTT</u>	Date / Time: <u>7/19/17 1830</u>	REQUESTED COMPLETION DATE: _____			REPORT TO: _____	PHONE: _____
Relinquished by: _____		Date / Time: _____	Received by: _____	Date / Time: _____	MATRIX TYPE: _____			CLIENT: _____	FAX: _____
Relinquished by: _____		Date / Time: _____	Received by: _____	Date / Time: _____	WW = waste water DW = drinking water L = Liquid S = soil A = Air SL = sludge SD = Solid CDPHE REPORT REQUIRED			ADDRESS: _____	CITY, STATE ZIP: _____
Database Entry By: _____		Date: _____	PWSID # _____			INVOICE TO: _____		ADDRESS: _____	CITY, STATE ZIP: _____
			Sample Kit Sent? <u>Yes / No</u>						



STEWART ENVIRONMENTAL CONSULTANTS, INC.
3801 Automation Way, Suite 200, Fort Collins, CO 80525

Batch: 2456586

Telephone: (970) 226-5500

Facsimile: (970) 226-4946

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CHAIN OF CUSTODY RECORD

STEWART ENVIRONMENTAL CONSULTANTS, INC.
3801 Automation Way, Suite 200, Fort Collins, CO 80525

Batch:

Telephone: (970) 226-5500

Facsimile: () PAGE OF

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Batch:

Facsimile: (970) 226-4946

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SEC USE ONLY							
Client No.		CLIENT:					
		Stratus Companies - Stewart Labs					
Sample No		SAMPLE COLLECTION INFO			Matrix Type	QC Report Needed	Total No. of Cont.
		Date	Time	Grab / Comp			
S10-199 173 A		7-17-17	13:30	G	MW-16	WW	1
							Method 8260 (see back of COC) SL
							Metals -- (see back of COC) SL
							Inorganic Analysis (see back of COC) SL
							Sulfide
							Cn
Compliance samples may require you to report the temperature of samples as they arrive in the laboratory. Would you like the temperature of samples recorded upon receipt by the laboratory? Please check. Yes, record and report temperature. No, temperature not requested. Leaving this field blank implies that the incoming temperature is not requested.							
RELINQUISHED BY		DATE / TIME		Received by		Date / Time	
[Signature]		7-17-17 19:00		[Signature]		7/18/17 11:00	
Relinquished by		Date / Time		Received by		Date / Time	
Relinquished by		Date / Time		Received by		Date / Time	
Database Entry By		JDM		Date		7/18/17	
REQUESTED COMPLETION DATE							
REPORT TO:							
PHONE:							
FAX:							
CLIENT:							
ADDRESS:							
CITY, STATE ZIP:							
INVOICE TO:							
ADDRESS:							
CITY, STATE ZIP:							
PWSID #							
Sample Kit Sent? Yes / No							



CHAIN OF CUSTODY RECORD

STEWART ENVIRONMENTAL CONSULTANTS, INC.
3801 Automation Way, Suite 200, Fort Collins, CO 80525

Batch:

Telephone: (970) 226-5500

Facsimile: (

PAGE ____ OF ____

EC USE ONLY								SAMPLER	
Client No.	CLIENT: Stratus Companies - ACZ						Name: James Stewart		
Sample No.	SAMPLE COLLECTION INFO			CLIENT SAMPLE IDENTIFICATION	Matrix Type	QC Report Needed	Total No. of Cont.	Signature:	
S10-	Date	Time	Grab / Comp						
19973A	7-17-17	13:30		MW-16	WW		1	ANALYSES REQUESTED	
								Phenols →	
								Total Organic Carbon *	
								Method 8270 (all normal compounds, including those below)	
								Benzyl Butyl Phthalate	
								Bis(2-ethylhexyl) phthalate	
								Di-n-butyl Phthalate	
								Diethyl Phthalate	
								Dimethyl Phthalate	
								Di-n-octyl Phthalate	
								1,4-Dioxane	
								Benzoic Acid	
								Benzyl alcohol	
								2-Methylphenol	
Compliance samples may require you to report the temperature of samples as they arrive in the laboratory. Would you like the temperature of samples recorded upon receipt by the Leaving this field blank implies that the incoming temperature is not requested.									
RELINQUISHED BY		DATE / TIME	Received by		Date / Time	REQUESTED COMPLETION DATE		REPORT TO:	
		7-18-17 14:30	CTF 7/19/17		1430			PHONE:	
								FAX:	
Relinquished by		Date / Time	Received by		Date / Time	MATRIX TYPE		CLIENT:	
						WW = waste water DW = drinking water L = Liquid S = soil SL = sludge A = Air SD = Solid		ADDRESS:	
								CITY, STATE ZIP:	
Relinquished by		Date / Time	Received by		Date / Time	CDPHE REPORT REQUIRED		INVOICE TO:	
								ADDRESS:	
Database Entry By		Date		PWSID #		Sample Kit Sent? Yes / No		CITY, STATE ZIP:	



STEWART ENVIRONMENTAL CONSULTANTS, INC.
3801 Automation Way, Suite 200, Fort Collins, CO 80525

Batch: 2456797

Telephone: (970) 226-5500

Facsimile: (970) 226-4946

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CHAIN OF CUSTODY RECORD

STEWART ENVIRONMENTAL CONSULTANTS, INC.
3801 Automation Way, Suite 200, Fort Collins, CO 80525

Batch: 2456904

Telephone: (970) 226-5500

Facsimile: (

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EC USE ONLY		CLIENT: Stratus Companies - ACZ						SAMPLER Name: James Stewart	
Client No.	Sample No.	SAMPLE COLLECTION INFO			CLIENT SAMPLE IDENTIFICATION	Matrix Type	QC Report Needed	Total No. of Cont.	Signature: [Signature]
		Date	Time	Grab / Comp					ANALYSES REQUESTED
	S10-109	7-27-17	10:00	G	MW-19	NW	1	3	Phenols
									Total Organic Carbon
									Method 8270 (all normal compounds, including those below)
									Benzyl Butyl Phthalate
									Bis(2-ethylhexyl) phthalate
									Di-n-butyl Phthalate
									Diethyl Phthalate
									Dimethyl Phthalate
									Di-n-octyl Phthalate
									1,4-Dioxane
									Benzoic Acid
									Bencyl alcohol
									2-Methylphenol

Compliance samples may require you to report the temperature of samples as they arrive in the laboratory. Would you like the temperature of samples recorded upon receipt by the laboratory? Leaving this field blank implies that the incoming temperature is not requested.

RELINQUISHED BY	DATE / TIME	Received by	Date / Time	REQUESTED COMPLETION DATE	REPORT TO:	PHONE:
[Signature]	7-27-17 14:10	CTF 7/27/17	1410			
Relinquished by	Date / Time	Received by	Date / Time	MATRIX TYPE	CLIENT:	FAX:
				WW = waste water DW = drinking water L = Liquid		
Relinquished by	Date / Time	Received by	Date / Time	S = soil SL = sludge A = Air SD = Solid	ADDRESS:	
				CDPHE REPORT REQUIRED	CITY, STATE ZIP:	
Database Entry By	Date			PWSID #	INVOICE TO:	
JDM	7/28/17				ADDRESS:	
				Sample Kit Sent? Yes / No	CITY, STATE ZIP:	



Sample Receipt Checklist

STEWART ENVIRONMENTAL CONSULTANTS, LLC.
2600 Canton Ct, Unit C, Fort Collins, CO 80525

Client: Stratus

Initials: JDM

Date: 7/31/17 Time: 11:00

MST/MDT

To be filled out by laboratory courier, if applicable:

- 1 Were samples retrieved by a laboratory courier?
2 Were samples on ice or in a refrigerated state upon retrieval?

Yes	No	NA
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Courier Initials: JX

Date: 7-28-17

Time: 18:30

To be filled out by laboratory sample receiving:

- 3 Shipping container/cooler intact?
4 Chain of Custody (COC) present?
5 Sample bottles intact? *
6 Samples on blue-ice?
7 Samples on wet ice?
8 Samples received within 4 hours of sampling?

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- 9 Record temperature of sample bottles within cooler with infra-red thermometer.

Container #				
Temp °C	<u>4.80</u>			

- 10 Sample thawed and free of any ice? *
11 COC complete, legible, signed and dated?
12 Labels on bottles complete and legible? *
13 COC in agreement with sample bottle labels? *
14 Proper container used for analyses requested? *
15 Samples requiring preservation preserved correctly? *
16 Sufficient sample volume for analyses requested? *
17 Samples within holding times for analyses requested? *
18 Samples requiring no headspace are free of headspace? *

Yes	No	NA
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

(VOC, TVPH, BTEX, Ethanol, Radon) If no, size of bubble: _____ < green pea, _____ > green pea

* If no, document on Chain of Custody.

Notes: Put into fridge upon arrival



Batch: 2456690

Facsimile: (970) 226-4946

PAGE OF

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CHAIN OF CUSTODY RECORD

STEWART ENVIRONMENTAL CONSULTANTS, INC.
3801 Automation Way, Suite 200, Fort Collins, CO 80525

Batch:

Telephone: (970) 226-5500

Facsimile: (

PAGE ____ OF ____

EC USE ONLY		CLIENT: Stratus Companies - ACZ						SAMPLER Name: <u>James Stewart</u>	
Client No.	SAMPLE COLLECTION INFO			CLIENT SAMPLE IDENTIFICATION	Matrix Type	QC Report Needed	Total No. of Cont.	Signature: <u>[Signature]</u>	
Sample No. S17-	Date	Time	Grab / Comp					ANALYSES REQUESTED	
1941254	7-13-17	14:26	G	MW-20	WW		3	Method 8270 (all normal compounds, including those below)	
								Total Organic Carbon	
								Benzyl Butyl Phthalate	
								Bis(2-ethylhexyl) phthalate	
								Di-n-butyl Phthalate	
								Diethyl Phthalate	
								Dimethyl Phthalate	
								Di-n-octyl Phthalate	
								1,4-Dioxane	
								Benzoic Acid	
								Bencyl alcohol	
								2-Methylphenol	
Compliance samples may require you to report the temperature of samples as they arrive in the laboratory. Would you like the temperature of samples recorded upon receipt by the									
Leaving this field blank implies that the incoming temperature is not requested.									
RELINQUISHED BY		DATE / TIME	Received by		Date / Time	REQUESTED COMPLETION DATE		REPORT TO:	
<u>[Signature]</u>		7-13-17	<u>[Signature]</u>		7/13/17			PHONE:	
		15:50						FAX:	
Relinquished by		Date / Time	Received by		Date / Time	MATRIX TYPE		CLIENT:	
						WW = waste water DW = drinking water L = Liquid		ADDRESS:	
Relinquished by		Date / Time	Received by		Date / Time	S = soil SL = sludge A = Air SD = Solid		CITY, STATE ZIP:	
						CDPHE REPORT REQUIRED		INVOICE TO:	
Database Entry By		Date		PWSID #		Sample Kit Sent? <u>Yes / No</u>		ADDRESS:	
								CITY, STATE ZIP:	



Sample Receipt Checklist

STEWART ENVIRONMENTAL CONSULTANTS, LLC.
2600 Canton Ct, Unit C, Fort Collins, CO 80525

Client: Stratus

Initials: JDM

Date: 7/14/17 Time: 10:00

MST/MDT

To be filled out by laboratory courier, if applicable:

- 1 Were samples retrieved by a laboratory courier?
- 2 Were samples on ice or in a refrigerated state upon retrieval?
- Courier Initials: JX Date: 7.13.17 Time: 19:10

Yes	No	NA
/		
/		

To be filled out by laboratory sample receiving:

- 3 Shipping container/cooler intact?
- 4 Chain of Custody (COC) present?
- 5 Sample bottles intact? *
- 6 Samples on blue-ice?
- 7 Samples on wet ice?
- 8 Samples received within 4 hours of sampling?
- 9 Record temperature of sample bottles within cooler with infra-red thermometer.

Container #				
Temp °C	4.80			

- 10 Sample thawed and free of any ice? *
- 11 COC complete, legible, signed and dated?
- 12 Labels on bottles complete and legible? *
- 13 COC in agreement with sample bottle labels? *
- 14 Proper container used for analyses requested? *
- 15 Samples requiring preservation preserved correctly? *
- 16 Sufficient sample volume for analyses requested? *
- 17 Samples within holding times for analyses requested? *
- 18 Samples requiring no headspace are free of headspace? *

Yes	No	NA
/		
/		
/		
/		
/		
/		
/		
/		
	✓	/

(VOC, TVPH, BTEX, Ethanol, Radon) If no, size of bubble: _____ < green pea, _____ > green pea

* If no, document on Chain of Custody.

Notes: MW 20 - resample VOC 8260 - too much headspace



Batch: 24S6797

Facsimile: (970) 226-4946

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CHAIN OF CUSTODY RECORD

STEWART ENVIRONMENTAL CONSULTANTS, LLC.
2600 Canton Ct, Unit C, Fort Collins, CO 80525

Batch: 2457180

Telephone: (970) 226-5500

Facsimile: (970) 226-4946

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Client No. 4844 LAB		CLIENT: Stewart Environmental						SAMPLER Print: James Stewart	
Sample No. 517236	SAMPLE COLLECTION INFO				SAMPLE IDENTIFICATION / NAME Q-HW-12	Matrix Type WW	QC Report Needed Y	Total No. of Bottles 3	Signature: [Signature] Analyses Requested
	Date	Time	Grab / Comp	Chlorine (ppm) if applicable					
1624	8-23-17	15:00	G						8260B Including: 1,1-DCE; Freon-11; Freon-113; Trans 1,2-DCE; 1,1-DCA; Cis-1,2-DCE; Chloroform; 2-Butanone (MEK); 4-Isopropyltoluene; 1,1,1-TCA; Trichloroethylene (TCE); Toluene; tetrachloroethylene (Perc); tetrahydrofuran (THF); vinyl chloride; total xylenes; benzene; Acetonitrile (Methyl Cyanide); Ethyl Methacrylate; 2-Pentanone, 4-Methanone
									8270 Expanded List
									Phenols, TKN, Mercury, Cyanide, Total Phosphorous, TOC
									Anions, Metals, carb, bicarb, sulfide
Notes:									REPORT TO: Trevor Mueller
									PHONE: 970.226.5500 FAX:
Relinquished by [Signature]	Date / Time 8-23-17 19:00	Received by [Signature]	Date / Time 8/24/17 10:00	REQUESTED COMPLETION DATE					E-MAIL: Lab@stewartenv.com
Relinquished by	Date / Time	Received by	Date / Time	MATRIX TYPE WW = waste water DW = drinking water L = liquid W = water S = soil Sl = sludge A = Air SD = Solid					CLIENT:
Relinquished by	Date / Time	Received by	Date / Time	CDPHE REPORT REQUIRED					ADDRESS: 2600 Canton Ct, Suite C CITY, STATE, ZIP: Fort Collins, CO 80525
Database Entry By JDM	Date 8/24/17		PWSID #		INVOICE TO:				
									ADDRESS:
									CITY, STATE ZIP: